



Chester Rural District Council

# ANNUAL REPORT

of the

MEDICAL OFFICER OF HEALTH

(Dr. W. A. Pollitt, M.R.C.S.,  
L.R.C.P., D.P.H.)

together with the Annual Report of the

CHIEF PUBLIC HEALTH INSPECTOR

(J. G. Wilkes, M.A.P.H.I.)

for the year

1965



**ANNUAL REPORT**  
**of the Medical Officer of Health for the**  
**CHESTER RURAL DISTRICT for the Year 1965**

TO THE CHAIRMAN AND MEMBERS OF THE COUNCIL.  
Madam Chairman, Ladies and Gentlemen,

I have the pleasure of submitting the Annual Report on the Health and Sanitary condition of the Chester Rural District Council for the year 1965.

The adjusted birth rate of 21.12 shows an increase compared with the rate of 18.80 for the year 1964. The birth rate for England and Wales is 18.0 per thousand live births. The adjusted death rate is 10.41 compared with the rate of 9.64 for 1964. The death rate for England and Wales is 11.5. There were no maternal deaths during the year.

During the year a working party composed of Medical Officers of Health and Chief Public Health Inspectors from the Rural Districts of Cheshire examined the Public Health problems involved with intensive farming. A report of the findings and suggested remedies will be published early in 1966.

Mention is made in the body of the report to unsatisfactory drinking water samples. These samples were obtained from a well used for domestic supply and a cafe. Owing to the difficulties of providing a permanent cure to the problem, connection to the mains supply was advised and duly effected.

With the popularity of foreign travel each summer there are requests, which increase in numbers each year, to trace contacts of enteric disease which have occurred on the Continent.

Most prevalent infectious disease was Measles which increased from 134 cases in 1964 to 265 cases in 1965. For several years the vaccination for prevention of Measles has been undergoing tests. It is disappointing to announce that, whilst a vaccination has been perfected it is not, as yet, sufficiently developed for general use in a mass immunisation programme.

Public apprehension concerning Poliomyelitis reached a peak during the year, following outbreaks in different parts of the country. This resulted in an abnormal demand for immunisation. Special sessions were instituted at the Divisional Office, Nicholas Street, and at the Upton Clinic. Details are given in my Annual Report as Divisional Medical Officer for the South West Cheshire Division of the County Council, which follows this report.

My thanks are due to the Chief Public Health Inspector and the staff of the Health Department for their valuable help and assistance.

I am,

Your Obedient Servant,

W. A. POLLITT, M.R.C.S., L.R.C.P., D.P.H.,

Medical Officer of Health.

# **CHESTER RURAL DISTRICT COUNCIL**

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## **Chairman of Public Health Committee:**

MRS. V. J. SHINN

## **Public Health Department Staff**

### **Medical Officer of Health:**

DR. W. A. POLLITT, M.R.C.S., L.R.C.P., D.P.H.

### **Chief Public Health Inspector:**

J. G. WILKES, M.A.P.H.I.

### **Deputy Chief Public Health Inspector:**

E. CLARKSON, M.A.P.H.I.

### **Additional Public Health Inspector:**

W. M. COBDEN, M.A.P.H.I.

### **Records Clerk:**

J. E. PARRY  
(Up to July, 1965)

### **Clerk:**

MRS. S. WILLIAMS

### **Shorthand Typist-Clerk:**

MISS P. ROBINSON  
(From 1st October, 1965)

## GENERAL PROVISIONS OF HEALTH SERVICES

### Laboratory Facilities

The Ministry of Health Regional Laboratory under its Director, Dr. Poole, is available in Chester for the examinations of bacteriological specimens.

### Ambulance Services

These are provided by the Cheshire County Council assisted by the Chester City Ambulances acting as an Agency Service.

### Nursing in the Home

Home nursing is undertaken by District Nurses under the direction of the Cheshire County Council.

### Clinics

County Council Clinics are provided in the following parts of the district:

Barrow	Infant Welfare
Christleton	Infant Welfare
Gt. Boughton	Infant Welfare
Huntington	Infant Welfare
Saughall	Infant Welfare
Upton	Infant Welfare and School Clinic
Chester	Orthopaedic and Tuberculosis

Special Rural Clinics are also available by appointment as and when required.

### Hospitals

The district is served by the General Hospitals at Chester, Barrow, Clatterbridge and Liverpool. The Hospital at Barrow provides for special treatment of Chest diseases.

## NATIONAL STATISTICS

The Birth Rate for England and Wales for 1965 was 18.0 per 1,000 population, as compared with 18.4 for 1964.

The Death Rate for England and Wales for 1965 was 11.5 per 1,000 population. In 1964 the Death Rate was 11.3.

Infant Mortality Rate for England and Wales, i.e. deaths of infants under 1 year of age per 1,000 live births was 19.0 as compared with 19.9 in 1964.

Natural increase in population (i.e. excess of births over deaths) 1954-1965—England and Wales:

Year	Per 1,000 Pop.	Year	Per 1,000 Pop.
1954 ... ..	3.9	1960 ... ..	5.6
1955 ... ..	3.3	1961 ... ..	5.4
1956 ... ..	4.0	1962 ... ..	6.0
1957 ... ..	4.6	1963 ... ..	5.8
1958 ... ..	4.7	1964 ... ..	7.1
1959 ... ..	4.9	1965 ... ..	6.5

# CHESTER RURAL DISTRICT

## STATISTICS AND SOCIAL CONDITIONS

Area: 43,811 acres.

Population mid-1965	...	...	...	...	...	...	...	32,500
Number of inhabited houses	...	...	...	...	...	...	...	9,845
Rateable value at 1st April, 1965	...	...	...	...	...	...	...	£1,427,929
Product of 1d. Rate at 1st April, 1965	...	...	...	...	...	...	...	£5,700

The Council-owned houses total 1,372, sixty of which were completed in 1965.

The number of private houses built in the year was 288.

### EXTRACTS FROM VITAL STATISTICS FOR 1965

#### Births

##### Live Births

	Male	Female	Total
Legitimate	300	293	593
Illegitimate	7	13	20

Birth Rate per 1,000 population: 18.86.

Using Comparability Factor of 1.12 the adjusted Birth Rate is 21.12.

##### Still Births

	Male	Female	Total
Legitimate	2	6	8
Illegitimate	—	—	—

Rate per 1,000 (Live and Still) Births: 12.89.

Total of Live and Still Births: 621.

#### Deaths

Male	Female	Total
197	237	434

Death Rate per 1,000 population: 13.35.

Using Comparability Factor of .78 the adjusted Death Rate is 10.41.

#### Deaths (due to maternal causes):

Pregnancy—Childbirth	...	...	...	...	...	...	Nil
Maternal Mortality Rate, i.e. per 1,000 live and still births	...	...	...	...	...	...	Nil

#### Deaths of Infants under one year:

	Male	Female	Total
Legitimate	6	5	11
Illegitimate	1	—	1

Infant Mortality Rate, i.e. per 1,000 live births: 19.57.

Deaths of Infants under four weeks of age (Neo-natal deaths):

	Male	Female	Total
Legitimate ... ..	6	4	10
Illegitimate ... ..	—	—	—

Neo-Natal Mortality Rate: 16.31.

Deaths of Infants under one week of age:

	Male	Female	Total
Legitimate ... ..	5	4	9
Illegitimate ... ..	—	—	—

Early Neo-Natal Mortality Rate: 14.68.

Perinatal Mortality Rate (Still births and deaths under 1 week)  
per 1,000 total live and still births: 27.37.

Illegitimate live births as a percentage of total live births:  
3.26 per cent.

Natural increase in population (that is, excess of births over  
deaths), 1954-1965:

Year	Pop.	Nat. Inc. per 1,000 Pop.	Year	Pop.	Nat. Inc. per 1,000 Pop.
1954 ... ..	26,790	—0.5	1960 ... ..	28,250	2.3
1955 ... ..	26,810	—1.35	1961 ... ..	28,170	2.69
1956 ... ..	27,680	—1.15	1962 ... ..	30,190	4.5
1957 ... ..	27,740	—1.26	1963 ... ..	30,850	2.88
1958 ... ..	27,380	—0.04	1964 ... ..	31,130	4.27
1959 ... ..	27,840	2.11	1965 ... ..	32,500	5.51

Table of number of Live Births and Birth Rate, 1954-65:

Year	Number	Birth Rate	Year	Number	Birth Rate
1954 ... ..	343	12.80	1960 ... ..	442	15.64
1955 ... ..	365	13.61	1961 ... ..	476	16.89
1956 ... ..	429	15.5	1962 ... ..	547	18.13
1957 ... ..	357	12.8	1963 ... ..	539	17.47
1958 ... ..	416	15.19	1964 ... ..	562	18.08
1959 ... ..	425	15.26	1965 ... ..	613	18.86

Table of number of Deaths and Crude Death Rate , 1954-1965:

Year	Number	Death Rate	Year	Number	Death Rate
1954 ... ..	356	13.3	1960 ... ..	377	13.34
1955 ... ..	401	14.96	1961 ... ..	400	14.19
1956 ... ..	461	16.65	1962 ... ..	411	13.60
1957 ... ..	390	14.06	1963 ... ..	450	14.91
1958 ... ..	420	15.23	1964 ... ..	429	13.78
1959 ... ..	366	13.15	1965 ... ..	434	13.35



Table of Infant Mortality, 1954-1965:

Year	Rate per 1,000		Year	Rate per 1,000	
	Number	Births		Number	Births
1954 ... ..	4	11.7	1960 ... ..	7	15.8
1955 ... ..	5	13.7	1961 ... ..	10	21.0
1956 ... ..	5	11.65	1962 ... ..	12	21.95
1957 ... ..	8	22.4	1963 ... ..	6	11.13
1958 ... ..	7	16.8	1964 ... ..	9	16.00
1959 ... ..	8	18.8	1965 ... ..	12	19.57

Deaths from Measles (all ages) ... .. Nil

Deaths from Whooping Cough ... .. Nil

Particulars of unusual or excessive mortality during the year:

	Male	Fe- male	Total	In 1964
(i) Diseases of the Heart and Circulatory system ... ..	78	75	153	151
(ii) Cancer ... ..	29	41	70	69
(iii) Vascular Lesions of Nervous System	27	57	84	79
(iv) Cancer of Lungs (included in (ii) above) ... ..	9	1	10	18
(v) Coronary Disease of Heart (inc. in (i) above) ... ..	39	25	64	71

### CAUSES OF DEATH DURING 1965

	Male	Female
Tuberculosis of the Respiratory System ... ..	—	1
Syphilitic Diseases ... ..	—	2
Other Infective or Parasitic Diseases ... ..	—	1
Cancer (all sites) ... ..	29	41
Leukaemia ... ..	1	—
Diabetes ... ..	1	2
Vascular lesion of Nervous System ... ..	27	57
Diseases of Heart and Circulatory System ... ..	78	75
Bronchitis ... ..	5	6
Pneumonia ... ..	20	25
Influenza ... ..	—	—
Ulcer of Stomach ... ..	2	—
Enteritis or Diarrhoea ... ..	1	2
Nephritis ... ..	—	2
Pregnancy and Childbirth ... ..	—	—
Congenital Malformations ... ..	2	4
Hyperplasia of Prostate ... ..	3	—
Suicide ... ..	1	—
Motor Vehicle Accidents ... ..	9	1
All other Accidents ... ..	4	3
Other Defined and Ill-Defined Diseases ... ..	14	17



## INFECTIOUS AND OTHER DISEASES

### Prevalence of and control over Infectious and other disease

The following notifiable diseases (other than Tuberculosis) were notified during the year:

	Total Cases Notified
Scarlet Fever ... ..	20
Whooping Cough ... ..	11
Measles ... ..	265
Dysentery ... ..	85
Pneumonia ... ..	1
Food Poisoning ... ..	10
Puerperal Pyrexia ... ..	—

## TUBERCULOSIS

### New Cases and Mortality during 1965:

Age Periods	Respiratory		Non-Respiratory		Total
	M	F	M	F	
Under 5 years ...	—	—	—	—	—
5-14 years ... ..	—	—	—	—	—
15-24 years ...	—	1	—	1	2
25-44 years ...	—	—	—	—	—
45-64 years ...	1	—	—	—	1
65 years and over	—	—	—	—	—
Age unknown ...	—	—	—	—	—
Totals ... ..	1	1	—	1	3

### Deaths:

Age Periods	Respiratory		Non-Respiratory		Total
	M	F	M	F	
Under 5 years ...	—	—	—	—	—
5-14 years ... ..	—	—	—	—	—
15-24 years ...	—	—	—	—	—
25-44 years ...	—	—	—	—	—
45-64 years ...	—	—	—	—	—
65 years and over	—	1	—	—	1
Age unknown ...	—	—	—	—	—
Totals ... ..	—	1	—	—	1

## **BRUCELLA ABORTUS INFECTION**

Routine sampling of raw milk sold in the District has shown one sample and one cow infected with *Brucella Abortus*.

One human case of this infection was diagnosed during the year. The number of herds from which raw milk is supplied to the public has reduced from 19 to 16 in the current year.

## **DYSENTERY**

Two outbreaks of note occurred during this year. The first at a Saughall school where the number of children absent rose from 30 to 69 before the disease began to decline. It is of interest to note that the school authorities had not reported this high absentee rate due to one cause.

The first intimation of the outbreak was given by a General Practitioner, who suspected the widespread nature of the illness.

The importance of following up such outbreaks is not limited to preventing an immediate spread, but also has other implications.

Several of the contacts were found to be food handlers and had to be excluded from work until there was no risk of food contamination.

## **SECTION 47—NATIONAL ASSISTANCE ACT**

The provisions of the above Act enable a local authority to apply for compulsory removal to a hostel or County Council hospital for aged and infirm persons who are in need of care and attention and who are unable to care for themselves. Much time and patience is devoted to the needs of the aged by a variety of workers and every effort is made to avoid compulsory removal of aged persons from their homes to hostels and hospitals. In all cases during the year, assistance when required was able to be given through domiciliary services or else removal to the appropriate hospital or hostel was effected by voluntary co-operation.

# ANNUAL REPORT FOR THE YEAR 1965

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TO THE CHAIRMAN AND MEMBERS OF THE CHESTER  
RURAL DISTRICT COUNCIL.

Madam Chairman, Ladies and Gentlemen,

I have pleasure in presenting my report on the work of the department for 1965.

The year was notable for the absence of any major item of national legislation in the field of Public Health and Housing other than the Rent Act, 1965, which as its title suggests is principally concerned with the adjustment and fixing of rents between landlord and tenant.

In June, 1965, certain sections of the Cheshire County Council Act, 1953, became enforceable in the Chester Rural District and it is hoped that these additional powers will prove useful in the future.

Development, mainly in the parishes of Great Boughton and Upton and to a lesser degree in Saughall will ultimately be reflected as an increasing responsibility to the department, particularly in the matter of refuse collection.

As indicated in my report for 1964, the increase in the time worked outside office hours has materialised and it is pleasing to record that a one hundred per cent inspection has still been maintained.

I again wish to express my sincere thanks to members of the Public Health Committee for their support and co-operation and all members of the Staff for their loyalty.

Yours faithfully,

J. G. WILKES,

Chief Public Health Inspector.

# ANNUAL REPORT 1965

## SANITARY CIRCUMSTANCES OF THE AREA

### Water Supply

The parish of Croughton with 7 dwellings and an estimated population of 21 is still supplied by private wells and it is hoped that the physical difficulties involved will be overcome in the near future. The Wirral Water Board, The Chester Water Company and the Wrexham and East Denbighshire Waterworks Company are the suppliers of mains water throughout the district and I am indebted to the officials of the three undertakings for their assistance whenever this has been required.

The number of dwellings and estimated population provided with a mains supply is given below:

Parish	No. of Dwellings	Est. Pop. supplied
Aldford	93	325
Bache	27	95
Backford	47	165
Barrow	289	1009
Bridge Trafford	12	42
Buerton	17	59
Capenhurst	94	360
Caughall	3	10
Chester Castle	1	2
Chorlton	23	81
Christleton	776	2716
Churton Heath	5	16
Claverton	2	6
Dodleston	123	430
Dunham Hill	159	556
Eaton	24	78
Eccleston	88	307
Elton	252	738
Great Boughton	2311	7722
Guilden Sutton	229	809
Hapsford	28	91
Hoole Village	98	344
Huntington	401	1399
Lea-by-Backford	59	192
Lea Newbold	7	23
Ledsham	41	134
Littleton	183	640
Little Stanney	81	284

Parish	No. of Dwellings	Est. Pop. supplied
Lower Kinnerton ... ..	39	127
Marlston-cum-Lache ... ..	29	94
Mickle Trafford ... ..	141	493
Mollington ... ..	153	534
Moston ... ..	74	244
Picton ... ..	23	86
Poultton ... ..	30	98
Puddington ... ..	106	321
Pulford ... ..	112	336
Rowton ... ..	111	330
Saighton ... ..	86	280
Saughall ... ..	766	2443
Shotwick ... ..	20	65
Shotwick Park ... ..	21	69
Stoak ... ..	59	195
Thornton-le-Moors ... ..	64	205
Upton ... ..	2557	8938
Wervin ... ..	26	90
Wimbolds Trafford ... ..	31	101
Woodbank ... ..	24	84
	<hr/> 9945	<hr/> 33766

Tabulated results of water samples submitted for bacteriological and chemical examination:

	No. taken	Satisfactory	Unsatisfactory
Bacteriological Samples (Mains) ...	13	13	—
„ „ (Private) ...	26	16	10
Chemical Samples (Mains) ... ..	4	4	—
„ „ (Private) ... ..	3	3	—
	<hr/> 46	<hr/> 36	<hr/> 10

Of the ten unsatisfactory bacteriological samples, one was taken from a private dwelling and nine were in respect of a primary sample and repeats obtained from a Cafe and Filling Station.

As the result of action taken both these properties have now been connected to the mains supply.

### Drainage and Sewerage

The layering of the new sewer in Mollington and parts of Saughall is nearing completion. Drainage problems in the area served by this new sewer have caused the department some concern for a considerable time and it is pleasing to know that the facilities now provided are an indication of the Council's progressive attitude.

Your consulting engineers, Messrs. C. J. Lomax & Son, are also proceeding with the implementation of extensions at Rowton and Christleton; this work is well in hand and should be completed at an early date.

Approval is awaited for the major scheme to serve the parish of Elton and it is hoped that the proposals for Guilden Sutton and Mickle Trafford will show marked progress in 1966.

**Refuse Collection and Disposal**

Labour shortages have again beset this service during the year but despite these difficulties an efficient and satisfactory service has been in operation throughout the district. With very few exceptions a weekly coverage of the district has been maintained and the number of complaints received have been few indeed. In November a new vehicle of 35 cubic yard capacity was delivered and brought into use in the Upton and Great Boughton areas and the ultimate advantage of this larger capacity vehicle will no doubt be advantageously reflected in 1966.

The substantial development in Great Boughton and Upton may possibly lead to a review of the service generally in the near future.

Controlled Tipping at Knolls Farm, Upton, continues with the full co-operation of the Regional Hospital Board and this aspect of public health can only be continued and maintained with the full support of all concerned to whom I am greatly indebted.

**Salvage**

The amount realised from the sale of materials was £744 11s. 3d.

**Offices, Shops and Railway Premises Act, 1963**

Class of Premises							Number registered during the year	Number registered at end of year	General Inspections
Offices	...	...	...	...	...	...	2	10	1
Retail Shops	...	...	...	...	...	...	14	44	12
Wholesale Shops and Warehouses							—	2	—
Catering Establishments, Canteens, etc.	...	...	...	...	...	...	1	26	—
Fuel Storage Depots	...	...	...	...	...	...	—	1	—
							17	83	13

Total number of visits to all kinds of Registered Premises under the Act—23.



## Summary of Contraventions

Section	Number of Contraventions found									
4	Cleanliness	...	...	...	...	...	...	...	...	—
5	Overcrowding	...	...	...	...	...	...	...	...	—
6	Temperature	...	...	...	...	...	...	...	...	12
7	Ventilation	...	...	...	...	...	...	...	...	—
8	Lighting	...	...	...	...	...	...	...	...	—
9	Sanitary Accommodation	...	...	...	...	...	...	...	...	—
10	Washing Facilities	...	...	...	...	...	...	...	...	10
11	Supply of Drinking Water	...	...	...	...	...	...	...	...	—
12	Clothing Accommodation	...	...	...	...	...	...	...	...	—
13	Sitting Facilities	...	...	...	...	...	...	...	...	—
14	Seats (Sedimentary Workers)	...	...	...	...	...	...	...	...	—
15	Eating Facilities	...	...	...	...	...	...	...	...	—
16	Floors, Passages, Stairs	...	...	...	...	...	...	...	...	4
17	Unfenced Machinery	...	...	...	...	...	...	...	...	—
18	Protection of young persons	...	...	...	...	...	...	...	...	—
19	Training of young persons	...	...	...	...	...	...	...	...	—
23	Prohibition of heavy work	...	...	...	...	...	...	...	...	—
24	First Aid Provisions	...	...	...	...	...	...	...	...	4
	Total	...	...	...	...	...	...	...	...	30

All contraventions were dealt with informally and matters brought to the notice of the persons responsible were given immediate attention.

It is anticipated that all registered premises will have been visited by the end of March, 1966.

### Clean Air Act, 1956.

The small number of industrial chimneys in the district have been kept under routine observation. In one instance only was it necessary to call attention to the emission of dark smoke and the full co-operation of the company concerned was received when the matter was reported. No areas in the district have been declared Smokeless Zones.

### Rodent Control

Work still continues on the basis of an annual contract or by short term clearance, depending on the extent of the infestation. The system of annual contract is applied mainly to agricultural and business premises; short term clearance being used where there is little or no risk of re-infestation.

A charge appropriate to the work involved is made in both the above cases but domestic properties are treated without payment.



The following is a summary of the visits made:

Private Dwellings ... ..	2559	
Agricultural Premises ... ..	547	
Business Premises ... ..	550	Poison baits laid:
Contracts ... ..	860	8,202
Local Authority ... ..	526	
Revisits ... ..	130	
Total ... ..	5172	

## Caravan Sites and Control of Development Act, 1960

The six permanently licensed caravan sites now provide accommodation for 197 caravans; approval for an additional 60 Caravans at Elton having been given during the year. It is estimated that housing by means of caravan dwellings on these licenced sites is approximately 450 persons. Licences have been issued in accordance with the Ministry's Model Standards and on the whole, maintenance and general management have been satisfactory.

Throughout the year there has been a periodic influx of itinerant caravan dwellers in various parts of the district. This is a situation which has taken up a great deal of your staff's time and will no doubt continue to do so until either a local or national policy is formulated to deal with this problem.

## HOUSING AND PUBLIC HEALTH ACTS

### Repair—Housing and Public Health Acts

Number of houses rendered fit after service of notices:

	Housing Act		Public Health Act		Totals	
	Sections 9, 10, 16 Informal	Formal	Informal	Formal	Informal	Formal
By Owner	26	9	499	3	525	12
By Local Authority	—	—	—	—	—	—
Totals	26	9	499	3	525	12

### Beyond Repair—Housing Act, 1957

Individual unfit houses	Number
Undertakings accepted (Section 16) ... ..	1
Closing Orders made (Section 17) ... ..	2
Demolition Orders made (Section 17 ... ..	7
Closing Orders made (Section 18) ... ..	—
Closing Orders determined (Section 27) ... ..	1
Closing Orders revoked and Demolition Orders substituted (Section 28) ... ..	—
Houses Demolished following Demolition Orders ... ..	36

## Clearance Areas

Represented during the year:

	Number
Areas ... ..	1
Houses unfit for human habitation ... ..	6
Houses included by reason of bad arrangement ... ..	—
House included on land required (Section 43) ... ..	—
Individuals to be displaced ... ..	14
Families to be displaced ... ..	5

## Summary of Action taken during the year

Houses demolished by local authority or owners:

	Number
(a) Unfit ... ..	36
(b) Other ... ..	—
Persons displaced:	
(a) Individuals ... ..	28
(b) Families ... ..	16

## INSPECTION OF MEAT AND OTHER FOODS

The following is a summary of the inspections carried out at the three licensed private slaughterhouses:

	Beasts	Calves	Sheep	Pigs	Total
Number slaughtered ...	1,944	50	9,147	5,312	16,453
Number inspected ...	1,944	50	9,147	5,312	16,453

### All diseases except Tuberculosis and Cysticercosis:

	Beasts	Calves	Sheep	Pigs
Whole carcasses condemned	3	8	1	3
Parts or organs condemned	457	1	484	1,744
Percentage affected ... ..	28.8	18.0	5.3	32.8

### Tuberculosis:

	Beasts	Calves	Sheep	Pigs
Whole carcasses condemned	—	—	—	—
Parts or organs condemned	—	—	—	33
Percentage affected ... ..	—	—	—	.6

### Cysticercosis:

Nine bovine carcasses which were found to be affected with this condition were treated by refrigeration in the approved manner.

Total weight of meat condemned and suitably disposed of was 5½ tons.

### Brucella Abortus:

During the year the following samples were obtained and submitted for Brucella examination from the 'raw milk' herds in this area and I am indebted to the Cheshire County Public Health Department for this information.

	Total submitted	Number Brucella Positive
Bulk Samples ... ..	74	—
Dealer Samples ... ..	84	1
Individual Cow Samples	38	1
	<hr/> 196	<hr/> 2

There were 16 dairy herds in the district from which milk was sold raw to the public.

### Food Sampling

I am indebted for the following information from the Chief Inspector of Weights and Measures of the Cheshire County Council, which relates to sampling carried out under the Food and Drugs Act, 1955, in the Chester Rural District.

Name of Sample	Number obtained	Number adulterated or not up to the recognised standard of quality
Almonds, ground ... ..	1	—
Biscuits, chocolate wholemeal	1	—
Brandy ... ..	1	—
Bread, milk ... ..	1	1
Bread, wholemeal ... ..	1	—
Butter ... ..	1	—
Candied Peel ... ..	1	—
Cheese, Cheshire ... ..	1	—
Chocolate, drinking ... ..	1	—
Coconut, dessicated ... ..	2	1
Coffee and Chicory Essence	1	—
Coffee, instant ... ..	1	—
Corned Beef ... ..	1	—
Cream, double ... ..	1	—
Cream, Devon dairy ... ..	1	—
Dried Fruit mixture ... ..	1	—
Dripping ... ..	1	—
Embrocation ... ..	1	—
Fish Cakes ... ..	1	—
Fish Paste, crab ... ..	1	—
Flour, self-raising ... ..	1	—
Fruit Salt ... ..	1	—
Gelatine B.P. ... ..	1	—

Name of Sample	Number obtained	Number adulterated or not up to the recognised standard of quality
Gin ... ..	1	—
Ginger Ale ... ..	1	—
Golden Eye Ointment ...	1	—
Gravy Browning ... ..	1	—
Honey ... ..	1	—
Ice Cream ... ..	2	—
Ice Lolly ... ..	3	—
Jam, mixed fruit ... ..	1	—
Lard ... ..	1	—
Lemon Curd ... ..	1	—
Lime Juice Cordial ... ..	1	—
Margarine ... ..	1	—
Marmalade ... ..	1	—
Milk ... ..	94	4
Milk, Condensed full cream unsweetened ... ..	1	—
Milk, condensed sweetened M/c skimmed ... ..	1	—
Milk Chocolate Fingers ...	1	—
Pepper, white ground ...	1	—
Perry, champagne ... ..	1	—
Pickled Red Cabbage ...	1	—
Potted Beef with Butter ...	1	—
Prunes ... ..	2	—
Rum ... ..	1	—
Saccharin Tablets ... ..	1	—
Salad Cream ... ..	1	—
Sausages, beef ... ..	1	—
Sausages, pork ... ..	3	1
Suet, shredded beef ... ..	1	—
Sweets, buttermints ... ..	1	—
Thyme, dried ... ..	1	—
Tomato Ketchup ... ..	1	—
Soup, cream of mushroom ...	1	—
	<hr/> 155 <hr/>	<hr/> 7 <hr/>

### Particulars of Samples not up to standard

Sample	Result of Analysis	Remarks
Milk.	Sub-standard but genuine. 1.1% deficient in solids-not-fat.	No action.
Milk.	1.1% deficient in solids-not-fat.	No action.
Pork Sausages.	15.4% deficient in meat.	Manufacturers fined £20 & £9/3/0 costs.
Milk Bread.	Contains negligible proportion (not exceeding 0.5%) of whole milk solids.	Manufacturers cautioned.
Milk.	Sub-standard but genuine. 2.3% deficient in solids-not-fat.	No action.
Dessicated Coconut.	Containing 50 p.p.m. of sulphur dioxide.	Formal sample to be taken.
Milk.	Containing 5.5% extraneous water.	Further sample to be taken.

### Particulars of food complaints from private purchasers.

From	Nature	Remarks
Housewife.	Milk containing fragments of glass and small insect.	Prosecuted and fined £10.
Householder.	Suspected extraneous water in milk.	Genuine.
C.C.C. School.	Glass in school milk.	No action.
Dairy.	Milk containing extraneous water.	Sample genuine.
Dairy.	Milk containing extraneous water.	Further sample to be taken.
Dairy.	Milk containing extraneous water.	Sample genuine.

### INFECTIOUS DISEASES

Notifications were received and investigations carried out into the following cases:

Scarlet Fever	...	...	...	...	...	...	...	20
Food Poisoning	...	...	...	...	...	...	...	10
Dysentery	...	...	...	...	...	...	...	85
Total	...	...	...	...	...	...	...	115

Details of specimens submitted to the Public Health Laboratory are given below and I wish to record my thanks to the Director and Staff for their assistance and guidance which has been made available at all times.

Number in which Salmonella were isolated ... ..	31
Number in which Shigella were isolated ... ..	271
Number of specimens negative ... ..	571
Total number of specimens submitted ... ..	<u>873</u>

**FACTORIES ACT, 1961**

**Inspections for purposes as to Health:**

Premises	Number on Register	Inspections	Number of Written Notices	Occupiers Prosecuted
1. Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities ... ..	8	16	—	—
2. Factories not in- cluded in (1) in which Section 7 is enforced by the Local Authority ...	51	80	10	—
3. Other Premises in which Section 7 is enforced by Local Authorities (exclud- ing outworkers) ...	36	36	—	—
Total ... ..	<u>95</u>	<u>132</u>	<u>10</u>	<u>—</u>

# Cases in which defects were found:

Particulars	Found	Remedied	Referred		No. of cases in which prosecutions were instituted
			To H.M. In-spector	By H.M. In-spector	
Want of Cleanliness (Sec. 1) ... ..	23	23	—	—	—
Overcrowding (Sec. 2) ...	—	—	—	—	—
Unreasonable Temp. (Sec. 3) ... ..	—	—	—	—	—
Inadequate Ventilation (Sec. 4) ... ..	1	1	—	—	—
Ineffective drainage of floors (Sec. 6) ... ..	2	2	—	—	—
Sanitary Conveniences (Sec. 7):					
(i) Insufficient ... ..	—	—	—	—	—
(ii) Unsuitable or defective ... ..	2	2	—	1	—
(iii) Not separate for sexes ... ..	—	—	—	—	—
Other offences (excluding outworkers) ... ..	—	—	—	—	—
Total ...	28	28	—	1	—

## Part VIII of the Act (Sections 133, 134):

No lists of Outworkers have been received during the year.



**CHESHIRE COUNTY COUNCIL**

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**South-West Cheshire  
Divisional Health Committee**

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# **ANNUAL REPORT**

**1965**

**DR. W. A. POLLITT, M.R.C.S., L.R.C.P., D.P.H.  
(Divisional Medical Officer)**

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ST. MARTIN'S LODGE  
NICHOLAS STREET  
CHESTER

Telephone: Chester 24678 (Extn. 343-344)

# **Annual Report on the Health Services of the South-West Cheshire Division for the Year 1965**

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Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my Annual Report on the Divisional Health Services for the year 1965. The Division comprises of the Borough of Ellesmere Port and the Rural Districts of Chester and Tarvin.

The total population has increased from 94,700 in 1964 to 97,780 in 1965. The area of the Division is 115,584 acres.

The County Health Committee passed the day-to-day management of Training Centres for subnormals to Divisional Health Committees. A more detailed survey of the activities of the Adult Training Centre at Ellesmere Port is given in the body of the Report.

The policy of controlled development of villages is starting to have an impact on the Child Welfare Services. The clinic at Farndon was transferred from the Memorial Hall to the Chapel House. The facilities available at Tarvin are being overcrowded but at the present time no suitable alternative can be found. Preliminary investigations are being made in Ashton and Elton where population increases suggest that Child Welfare Clinics are needed.

The Division was allocated a van and the services of a driver-handyman for transport duties including the following: Delivery of baby foods to Clinics; delivery and collecting large items of loan equipment, i.e. wheelchairs; transporting members of the Handicapped Club; collecting raw materials and delivering goods for the Adult Training Centre. This transport has saved the Ambulance service many non-essential runs and eliminated the need to hire taxis for the transporting of Handicapped Club members.

A noticeable feature of recent years is the ability of severely handicapped people to be cared for in their own homes. This is creating a demand for more extensive structural adaptations to cater for these special needs, and also for an increase in the amount and variety of Handicapped Aids loaned and information given to assist these patients.

In the Summer the country was alarmed by poliomyelitis outbreaks and many citizens became anxious to have poliomyelitis vaccine. The demand became so persistent that special sessions were created when the public could have the vaccine. These were carried out at all Child Welfare Clinics but the bulk of the work was performed at the Stanney Lane and Upton Clinics and the Divisional Office at Chester.

In all, 6,748 people were given a first course of three doses and 3,133 people were given a reinforcing dose. In addition many people were immunised by their General practitioners or Works Medical Officers. In the Ellesmere Port area 1,830 doses were issued to Family Doctors, 3,570 doses issued to Works Doctors and 50 doses to the hospital staff. It is regrettable, however, that 1,400 persons failed to complete their primary course of immunisation. This fall off was in spite of reminders given for the date to return for outstanding doses of the vaccine. The fact that one month elapses between each dose and that the newspaper and news service coverage had diminished and nearly disappeared by the time second and third doses were due may be a factor. Nevertheless a tremendous effort was made by all the staff and by many voluntary workers who gave their time unstintingly and in doing so did a very valuable job.

I wish to record my appreciation of the support received from the Chairman and members of the Committee throughout the year, to the County Medical Officer and his staff for their generous help, to Mr. R. J. Bernie, Clerk of the Committee, and to the clerical staff for their co-operation on all occasions.

W. A. POLLITT, M.R.C.S., L.R.C.P., D.P.H.,

Divisional Medical Officer.

# **CHESHIRE COUNTY COUNCIL**

## **SOUTH-WEST CHESHIRE DIVISIONAL HEALTH COMMITTEE Report for the Year ended 31st December, 1965**

### **CARE OF MOTHERS AND YOUNG CHILDREN**

#### **Ante-Natal Clinics**

There are two Ante-Natal Clinics held in the Division. These clinics are staffed by Consultant Obstetricians, Midwives and Health Visitors. Mothers also attend at these clinics for Post-Natal examination.

Every effort is made to provide instructions in mothercraft for those attending the ante-natal clinics by means of talks, demonstrations, discussion groups and the showing of film strips and films.

Attendance figures at the two clinics are set out below.

	ANTE-NATAL		POST-NATAL	
	New Cases	Total Attendances	New Cases	Total Attendances
Ellesmere Port	400	1,894	232	238
Little Sutton	161	737	52	63

Dental facilities are available free of charge to expectant and nursing mothers, and during the year six women received treatment.

Clinics for Ante-Natal and Post-Natal mothers are held as follows:

#### **Ante-Natal Clinics**

- Welfare Centre, Stanney Lane, Ellesmere Port—  
Monday morning and Wednesday afternoon each week.
- Welfare Centre, 462, Chester Road, Little Sutton—  
Friday morning each week.

#### **Midwives' Clinics and Preparation Clinics**

- Welfare Centre, Stanney Lane, Ellesmere Port—  
Monday afternoon each week.
- Welfare Centre, 462, Chester Road, Little Sutton—  
Thursday afternoon each week.

#### **Dental Clinics (expectant Mothers)**

- Welfare Centre, Stanney Lane, Ellesmere Port—  
By appointment.
- Welfare Centre, 462, Chester Road, Little Sutton—  
By appointment.

### **CHILD WELFARE CENTRES**

Attendances at these clinics throughout the Division continue to show an increase in all the age groups. At the clinics advice is given in child management and feeding. Children are medically examined at their first attendance and subsequently as required. Immunisation is given and routine screening procedure performed.

A new clinic was started at the Congregational Church Hall, Green Lane, Vicar's Cross. This will serve the new housing estates and relieve pressure on the clinic at Great Boughton.

#### New cases and attendances at individual Clinics:

				New Cases 0—1	Total 0—1	Attendances 1—2	2—5
Barrow	...	...		15	147	61	98
Christleton	...	...		46	401	120	125
Farndon	...	...		30	248	68	72
Great Boughton	...	...		157	1876	252	203
Huntington	...	...		48	467	133	73
Kelsall	...	...		39	421	147	128
Malpas	...	...		40	317	154	101
Saughall	...	...		42	327	125	119
Tarvin	...	...		41	504	166	159
Tattenhall	...	...		18	143	31	17
Upton	...	...		217	2097	266	117
Waverton	...	...		47	507	152	43
E. Port (Stanney Lane)				552	4143	375	190
(Overpool)	...			38	237	20	8
(Westminster)				74	344	110	75
Little Sutton	...	...		240	2079	282	117
*Vicar's Cross	...	...		7	80	23	15
				1651	14338	2485	1660

\* One month only

#### Attendances of children under 5 at the following Specialist Clinics:

				New Cases	Total Attendances
Ophthalmic	...	...	...	24	76
Dental Treatment	...	...	...	153	237
E.N.T.	...	...	...	8	14

#### Screening Tests of Hearing

Health Visitors who have been specially trained in the technique carry out routine tests of hearing on babies of nine months and over at the Child Welfare Clinics.

Where necessary, children are referred to the Ear, Nose and Throat Clinics staffed by consultant surgeons and to Professor Ewing and his colleagues from the Manchester University Department for Education of the Deaf. These clinics deal with children of pre-school age and of school age having hearing defects.



## **Phenylketenuria**

All babies are tested by Health Visitors either at home or in the clinic for phenylketenuria, one of the causes of backwardness in children. Early recognition and treatment of this condition prevents any deterioration taking place.

### **Child Welfare Clinics are held as follows:**

- Welfare Centre, Stanney Lane, Ellesmere Port—  
Tuesday and Friday afternoons each week.
- Welfare Centre, Stanney Lane, Ellesmere Port—  
Young Children's Clinic (age 2-5) 4th Thursday  
afternoon in each month.
- Welfare Centre, 462, Chester Road, Little Sutton—  
Monday afternoon each week.  
Young Children's Clinic (age 2-5) 1st Tuesday afternoon  
each month.
- Castrol Social Club, Overpool—  
1st and 3rd Thursday afternoon each month.
- Congregational Church Hall, Grace Road, Ellesmere Port—  
1st and 3rd Wednesday afternoon each month.
- Village Hall, Barrow—  
1st and 3rd Wednesday afternoon each month.
- Women's Institute, Christleton—  
1st and 3rd Thursday afternoon each month.
- Chapel House, Farndon, near Chester—  
1st and 3rd Thursday afternoon each month.
- Congregational Church Hall, Great Boughton—  
2nd and 4th Tuesday afternoon each month.
- Village Hall, Huntington, Chester—  
2nd and 4th Wednesday afternoon each month.
- Parish Hall, Kelsall—  
1st and 3rd Tuesday afternoon each month.
- Jubilee Hall, Malpas—  
1st, 3rd and 5th Monday afternoon each month.
- Vernon Institute, Saughall—  
1st and 3rd Monday afternoon each month.
- The Vicarage, Tarvin—  
2nd and 4th Wednesday afternoon each month.
- Barbour Institute, Tattenhall—  
1st and 3rd Monday afternoon each month.
- Welfare Centre, Upton—  
Thursday afternoon each week.
- Presbyterian Church Hall, Waverton—  
2nd and 4th Tuesday afternoon each month.
- Congregational Church Hall, Vicar's Cross—  
Tuesday afternoon each week.

Specialist Clinics for pre-school children and school children are held at the following locations:

### **Dental Clinics (Pre-School, School Children):**

- Welfare Centre, Stanney Lane, Ellesmere Port—  
By appointment.
- Welfare Centre, 462, Chester Road, Little Sutton—  
By appointment.

## **Audiology and Screening Clinics**

- Welfare Centre, Stanney Lane, Ellesmere Port—  
Tuesday afternoon each week.  
School children Monday morning alternate weeks.
- Welfare Centre, 462, Chester Road, Little Sutton—  
3rd Tuesday afternoon each month.
- Welfare Centre, Weston Grove, Upton—  
2nd and 4th Friday afternoon each month.
- Rural Clinics—  
By appointment, as required.

## **WELFARE FOODS—MINISTRY AND PROPRIETARY BRANDS**

The distribution of Welfare Foods, both Ministry and Proprietary Brands, continued to operate satisfactorily, and our appreciation is due to the voluntary workers who give many hours of their time to assist in this capacity both at clinics and at voluntary distribution points.

### **Ministry**

National	Cod	A/D.	Orange	
Dried Milk	Liver Oil	Tablets	Juice	Total
13,067	1,449	1,351	16,526	32,393

### **Proprietary Brands**

Proprietary Branded Infant Foods continue to show an increase, offsetting the slight decrease in Ministry Welfare Foods.

Ministry Welfare Foods are distributed at the following centres:

### **Welfare Clinics**

Ellesmere Port, Little Sutton, Overpool, Westminster Ward (E. Port), Barrow, Christleton, Farndon, Great Boughton, Huntington, Kelsall, Vicar's Cross, Malpas, Saughall, Tarvin, Tattenhall, Upton, Waverton.

### **Voluntary Persons**

Duddon, Tilston.

Proprietary Brands of Welfare Foods are issued at the Welfare Clinics in the Divisional Area.

## **DAY NURSERY**

Attendances throughout the year have not been particularly good; whilst at times the Nursery is full to capacity, at other times there are, regrettably, occasions when attendances are poor. Some of the absences are due to the seasonal ailments, coughs, colds, measles, etc. In other instances they are due to the lack of



responsibility of social problem parents to their children, who for one reason or another fail to bring them to the Nursery. Certain of the children are admitted for the benefit of the child not necessarily for the benefit of the parents, and whilst absences are to be deplored it is essential to keep the child's name on the register to ensure that as far as possible the child receives care, attention, and nourishment.

The Nursery is a 50 place training Nursery, and in an endeavour to maintain an average attendance near to this figure, we have had 65 to 70 children on the register. Further increase in the number on the register are impracticable due to the risk of severe overcrowding should attendances improve.

Everything is done to encourage the parents to bring their children. Poor attenders are followed up by the Health Visitors and Child Care Officers.

It is pleasing to be able to say that the Nursery fulfils a social need, and whilst in years gone by there were many non-priority cases, all cases have now a priority classification.

A thought must also be given to the Staff at the Nursery, the social problem (sometimes maladjusted) child is more difficult to cope with and although at times the Nursery may have a below capacity attendance, the staff are deployed to their full extent. The work is arduous, sometimes exhausting, and my thanks are due to the Matron and the Staff for the splendid way they carry out their duties and responsibilities.

Cases were referred for admission from several sources. Parents, General Practitioners, Health Visitors, Assistant Medical Officers and the Area Children's Officer.

The Nursery is approved by the Ministry of Health as a training nursery for Nursery Students and during the year two Nursery Students were in training.

During 1965 one student sat the examination for the National Nursery Examination Board Certificate for Nursery Nurses and she was successful.

Facilities continue to be made available to local schools for the older girls to attend for training in mothercraft.

At the close of the year there were 65 children on the register, all of whom were priority cases.

	Daily Average No. Attending	Total Attendances
Aged 0—2 years ... ..	18	4,403
Aged 2—5 years ... ..	24	5,957

### MIDWIFERY AND HOME NURSING

Number of births during the year, 2,009 (including 30 still-births) (adjusted for inward and outward transfers).

In order to save time and increase efficiency a change over from glass syringes to pre-sterilised disposable syringes has been effected. This eliminates the nurses having to boil syringes, a time-consuming process, in the patient's home.

### DOMESTIC HELP SERVICE

The Domestic Help Service again shows an increase in demand, both in the numbers of persons supplied and the length of time for which the help is required.

Number of persons supplied with Domestic Help:

1959	1960	1961	1962	1963	1964	1965
154	185	237	274	334	395	421

Number of persons for whom there was a continued need for the supply of help as at 31st December of each year:

1959	1960	1961	1962	1963	1964	1965
84	112	136	169	193	218	229

Number of hours supplied:

1959	1960	1961	1962	1963	1964	1965
32,126	38,805	50,218	59,533	65,337	72,081	75,885

The supply of this service in the main is to the aged and infirm, the chronic sick, who without the help would undoubtedly require hostel or hospital accommodation. In some instances the help is only required on one, two or three days per week, in other cases help is supplied each day.

The following is a summary of Domestic Help supplied to persons with a continued need as at the 31st December, 1965:

1	case	has	been	in	receipt	of	help	for	10	years
3	cases	have	„	„	„	„	„	„	9	„
4	„	„	„	„	„	„	„	„	8	„
3	„	„	„	„	„	„	„	„	7	„
6	„	„	„	„	„	„	„	„	6	„
17	„	„	„	„	„	„	„	„	5	„
25	„	„	„	„	„	„	„	„	4	„
29	„	„	„	„	„	„	„	„	3	„
32	„	„	„	„	„	„	„	„	2	„
46	„	„	„	„	„	„	„	„	1	„
63	„	„	„	„	„	„	„	„	less	than 1 year

421 persons received Domestic Help during the year and the following is an analysis of the types of cases to whom help was given.

(a)	Persons over 65	...	...	...	...	292
(b)	Chronic Sick (including T.B.)	...	...	...	...	19
(c)	Mentally disordered	...	...	...	...	3
(d)	Maternity	...	...	...	...	64
(e)	Others	...	...	...	...	43

The following is a summary of the work carried out during the year:

A.	Number of new applicants	...	...	...	252
	(Of these, 46 were cancelled)				
B.	Number of Domestic Helps employed at 31.12.65	...	...	...	116
C.	Number of cases attended during the year	...	...	...	421
D.	Number of cases of continued need at 31.12.65	...	...	...	229
		...	...	...	—
E.	Number of hours Domestic Help supplied	...	...	...	75,885
F.	Amount recovered from Future Recovery cases	...	...	...	£581/19/0
G.	68 cases were brought to the attention of the Committee during the year. 19 cases were defined as Future Recovery Cases.				

In 2 Future Recovery Cases collection was deferred.

In 11 Future Recovery Cases recovery of the accumulative balance was approved.

In 20 cases arrears were cancelled.

In 15 cases the assessment was reduced.

In 15 cases the Clerk of the County Council was asked to take steps to recover arrears.

**PREVENTION OF ILLNESS — CARE AND AFTER-CARE**

**1. Tuberculosis**

(a) Removed from area	...	...	...	...	5
(b) Recovered	...	...	...	...	22
(c) Died	...	...	...	...	2
(d) Number on the Register at the close of year					577

**2. Nursing Equipment**

850 articles were loaned to elderly, nursing and handicapped persons during the year. The period of loan varies in accordance with the needs, in the first instance the loan is for three months which can be extended if required.

The Nursing Equipment is mainly stored at the Divisional Offices, Chester and Ellesmere Port: the following is a list of the various items held:

- Invalid Wheelchairs.
- Sheets (single).
- Sheets (draw).
- Sheets (rubber/plastic).
- Air Rings.
- Walking Sticks.
- Special Spastic Chair.
- Water/Air beds.
- Bed Pulley.
- Back Rests.
- Bed Pans.
- Urinals.
- Adjustable Tables.
- Ramp.
- Helping Hand.
- Sputum Mugs.
- Sputum Flasks.
- Hoyer Hoist.
- Dunlopillo Mattresses.
- Dunlopillo Cushions.
- Bed Cages.
- Nocturnal Enuresis Alarm.

Beds with chain and handle.  
3 and 4-legged Walking Aids.  
Commodes.  
Crutches.  
Special Toddlers' Walking Aid.  
Bonaped Walking Aid.  
Fireguards

In addition the District Nurse/Midwives in the Rural areas each have a small stock of the smaller items, bedpans, urinals, rubber sheets, etc.

### **3. Handicapped Persons**

- (i) At the end of the year there were 116 cases on the handicapped persons register many of whom were in regular employment. All cases have been visited by the Health Visitors during the year, and in the majority of cases where the person was not in regular employment the services of the County Council were not required.
- (ii) Number of persons in the area registered with the Chester and District Blind Welfare Society—135.  
Number of partially sighted persons in the area registered with the Chester and District Blind Welfare Society—17.
- (iii) Number of persons registered as Deaf and Dumb, Hard of Hearing—59.
- (iv) Adaptations were carried out in the houses of 17 handicapped persons.
- (v) **Disabled Drivers' Car Badges**

There were 6 new applicants for disabled Driver Car Badges.

At the close of the year there were 30 Disabled Car Drivers on the register.

### **Handicapped Persons' Club, Ellesmere Port**

The Handicapped Persons' Club continued to operate satisfactorily at the York Road Ellesmere Port premises. The club is open each Thursday afternoon and at the close of the year there were 16 members. The total attendances through-

out the year was 502. There is an occupational therapist in attendance, who supervises the club and assists the members in rehabilitation. In May, the Division secured a second-hand Morris Mini 'bus which has proved a great asset in the conveyance of the members to and from the Club.

I am very grateful to the members of the W.V.S. for their assistance both at the club and arranging social activities, visits to the Zoo, entertainments, etc.

#### **4. Convalescence**

Five persons were sent for convalescence during the year.

### **HEALTH EDUCATION**

Health Visitors and medical staff are giving talks to many voluntary societies and going into schools to give talks on different aspects of health and hygiene.

One valuable aspect of Health Education is the description of the Health Services to visiting delegations from other authorities, Regional Hospital Board and Ministry trainees and from foreign countries. Several such delegations were given this information and taken round the Clinics, Day Nursery and Training Centres. This included a party of 12 Administrators from the Sudan.

Senior pupils are encouraged to visit the Day Nursery and the Clinics at Stanney Lane and Weston Grove, Upton, by arrangements with the Domestic Science and Head Teachers.

Special features on selected items are on display at the main Clinics and the staff show considerable ingenuity in devising eye-catching arrangements.

The creation of a Merseyside Committee on cancer education has resulted in several voluntary societies having lectures on this most important subject.

An equally valuable activity has been the one day courses arranged by the Cheshire Community Council for voluntary welfare workers in the Tarvin and Ellesmere Port areas at which the Divisional Medical Officer lectured on the assistance available from the County Health Department.

### **PROBLEM FAMILIES**

Quarterly meetings are held to ensure that the most effective use is made of all those concerned with problem families and



children who may have been neglected or ill-treated. Smaller group meetings to discuss any individual families are called between quarterly meetings if circumstances require this to be done.

These meetings are presided over by the Area Children's Officer and the following list indicates the representatives normally attending:

Divisional Medical Officer.

Health Visitor.

Welfare Department Case Worker.

N.S.P.C.C. Inspector.

Representatives of local Housing Departments.

National Assistance Board.

School Attendance Officers.

Mental Health Welfare Worker.

Representatives of local Voluntary Bodies including C.A.B.

Probation Officer.

Selected cases are discussed at these meetings when observations are made by those intimately concerned. After due deliberation it is usually agreed that the main supervision and investigation for the time being will be delegated to the appropriate worker who, in the meantime, will keep in touch with those others most concerned with the case in question.

Such arrangements prevent a continual stream of workers calling at the home in a short space of time.

It will be appreciated that these meetings present at times insuperable problems, whilst others present opportunities for help and supervision. In many instances the constant supervision employed, whilst not solving a particular problem is often able to stop further deterioration and to maintain a family on an improved standard.

## **CHIROPODY SERVICE**

At the commencement of the year there were 761 persons on the register for Chiropody treatment. During the year a further 159 applications were received, of whom 125 were granted treatment free of charge, 17 at half cost, 17 were not eligible. At the end of the year there were 785 persons on the register receiving Chiropody treatment.



**Details of service provided**

PLACE OF TREATMENT	OVER 65		PHYSICALLY HANDICAPPED	
	No. of Patients	No. of Treatments	No. of Patients	No. of Treatments
Chiropodist's Surgery	430	2394	6	25
Home of patient	373	1840	7	44

No. of cases in which the County Council paid full fee—743

No. of cases in which the County Council paid part fee— 73

The service is available to persons over the age of 65 years, physically handicapped persons and expectant mothers recommended for such treatment by their family doctor or district nurse. Persons who receive any National Assistance benefit, or whose sole income is the National retirement pension, are eligible for free treatment under the provisions of the scheme. Persons in receipt of income from other sources may have to pay towards the cost of the treatment, depending on the amount of the additional income. Treatment in the first instance is monthly for the first six months, thereafter alternative months, unless a recommendation is received from either the patient's Doctor, the District Nurse or the Chiropodist, requesting further monthly treatment.

The patients are allowed to choose from a list of recognised Chiropodists the Chiropodist they wish to attend for treatment. In some cases when the patient cannot attend the Chiropodist's surgery, the Chiropodist can visit the patient at his/her home.

**MENTAL HEALTH SERVICE**

**Adult Training Centre**

Attendances throughout the year have been good, absenteeism being mainly due to seasonal ailments, in some instances failure of parents to ensure the trainees' attendance.

Total number of attendances .....	16,235
Number on the Register at the commencement of the year .....	80
Number on the Register at the close of the year .....	90

The trainees are kept fully occupied with occupational training and contract work. The contracts secured in previous years still operating: it is hoped that industry may be able to offer further contracts to maintain a steady flow throughout the year.

It is noticeable that many of the trainees have socially improved during their attendance at the Centre, they are trained in "Self Help" money values, shopping, ability to tell the time, personal hygiene, post, and conduct in public establishments. The hairdressing section continues to flourish in the female department. Towards the end of the year parties of trainees under the care of an instructor have been paying visits to Chester to see points of interest.

Three of the trainees were placed in employment during the year, two of whom are reported to be working very well, the remaining one was unfortunately unable to keep her job.

Cookery classes were introduced to the male trainees to enable them to manage light meals (bacon and egg and similar breakfast dishes); they show remarkable ability and adeptness.

### Staff

Mrs. Sutton, the Deputy Superintendent, was appointed Superintendent of the Junior Training Centre at Bromborough, and Mrs. Piggott was appointed Deputy Superintendent in her place.

Mr. Strickland completed a year's course of instruction and obtained the Diploma of the National Association of Mental Health.

## VACCINATION OF PERSONS UNDER AGE 16 COMPLETED DURING 1965

### A. Completed Primary Courses—Number of persons under age 16

Type of vaccine or dose	Year of Birth				1958 —61	Others under age 16	TOTAL at clinics	By G.P.s
	1965	1964	1963	1962				
1. Quadruple DTPP	—	—	—	—	—	—	—	—
2. Triple DTP	444	1036	130	50	74	14	488	1260
3. Diphtheria/Pertussis	—	—	—	—	—	—	—	—
4. Diphtheria Tetanus	2	—	4	3	8	—	2	15
5. Diphtheria	—	1	—	—	—	3	3	1
6. Pertussis	—	—	—	—	—	—	—	—
7. Tetanus	—	—	—	—	—	7	—	7
8. Salk	—	—	—	—	—	—	—	—
9. Sabin	410	1235	306	262	725	986	2249	1675

Poliomyelitis Sabin—In addition to the figures quoted above, 4,285 persons over the age of 16 received a primary course of vaccination. (Plus 1,400 persons who had 1 or 2 doses of primary polio vaccination but failed to return for 3rd dose).

B. Reinforcing Doses—Number of persons under age 16

Type of vaccine or dose	Year of Birth				1958 —61	Others under age 16	TOTAL	
	1965	1964	1963	1962			at clinics	By G.P.s
1. Quadruple DTPP	—	—	—	—	—	—	—	—
2. Triple DTP	—	29	20	14	250	132	95	350
3. Diphtheria Pertussis	—	—	—	—	—	—	—	—
4. Diphtherio Tetonus	—	—	1	4	563	22	446	144
5. Diphtherio	—	—	—	—	13	725	570	168
6. Pertussis	—	—	—	—	—	—	—	—
7. Tetanus	—	—	—	—	1	—	—	1
8. Salk	—	3	15	—	—	—	3	15
9. Sobin	—	98	318	323	2459	2510	3343	2365

Poliomyelitis Sobin—In addition to the figures quoted above, 2,441 persons over the age of 16 received a reinforcing dose of vaccine.

C. Smallpox Vaccination

No. of persons	Year of Birth				Others Under 16 yrs. of age	TOTAL	
	1965	1964	1963-61	1960-51		ot Clinics	By G.P.s
1. Vaccinated	43	496	451	30	3	446	627
2. Re-Vaccinated	—	2	6	32	10		

Adults over the age of 16:

Primary vaccination .....	41
Re-vaccination .....	135

SUPPLEMENTARY INFORMATION REGARDING  
CHILDREN VACCINATED UNDER 1 YEAR OF AGE

	0—3 months	3—6 months	6—9 months	9—12 months
Number vaccinated	22	53	41	36

B.C.G. VACCINATION

No. of Consent forms issued .....	1045
No. of Consent forms returned with parents' consent ...	959
No. of Children Heaf tested .....	883
No. of Children positive to Heaf test .....	101
No. of Children negative to Heaf test .....	748
No. of Children B.C.G. vaccinated .....	748

# Statistics relating to cases of Tuberculosis on Notification Registers of District Councils in the Division

	MALES			FEMALES			TOTAL	
	Pulmonary	Non-Pulmonary	Total	Pulmonary	Non-Pulmonary	Total	Pulmonary	Non-Pulmonary Total
1. Cases on Register at 1.1.65 ... ..	235	71	306	212	57	269	447	128 575
2. Cases notified and transfers into area during year ... ..	15	—	15	12	4	16	27	4 31
3. Number of cases removed from Register during year ... ..	12	1	13	15	1	16	27	2 29
4. Cases on Register at 31.12.65 ... ..	238	70	308	209	60	269	*447	*130 *577

\*This figure is made up as follows:

	Pulmonary	Non-Pulmonary	Total
1. Ellesmere Port M.B. ... ..	206	40	246
2. Chester R.D.C. ... ..	150	41	191
3. Tarvin R.D.C. ....	91	49	140
	<u>447</u>	<u>130</u>	<u>577</u>

# **INFECTIOUS DISEASES NOTIFIED, 1965**

DISTRICT	DISEASE																		
	Dysentery		Scarlet Fever		Whooping Cough		Measles		Pneumonia		Erysipelas		Food Poisoning		Encephalitis				
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
Ellesmere Port Municipal Borough	...	...	...	...	...	...	35	34	9	7	30	33	367	303	—	1	2	—	—
Chester Rural District	...	...	...	...	...	...	47	38	10	10	6	5	136	129	—	1	6	4	2
Tarvin Rural District	...	...	...	...	...	...	1	1	14	23	6	14	108	108	2	3	—	—	—
TOTALS	...	...	...	...	...	...	83	73	33	40	42	52	611	540	2	5	8	4	2







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